Form 2801 (was OG-2805/Pink) Rev. 3/05

## Michigan Department of Education GRANTS COORDINATION AND SCHOOL SUPPORT

Direct questions regarding this form to 3-1806.

## **GRANT AWARD APPROVAL FORM**

1. OFFICIAL NAME OF GRANT	PROGRAM:	Date of SBE Approval of G	rant Criteria 8/9/05		
20052006 (years) (years) Intensive Training of Mentors for High Needs School Districts (title)					
Type: ⊠Initial □Amendment	Continuation				
Legislation Authorizing This Grant Program: Michigan State School Code 1526 and 1527					
⊠Federal Grant: CFDA Number	84-367A	State Grant	Other (Private, Foundation)		
2. Purpose of Grant Program: teachers built on the New Teacher materials and formative assessmentes.	r Center model (Santa Cruz, CA),	using the ASSIST	Type of Grant Program: (check one)  Competitive Formula Other: (specify below)		
3. SBE Priorities and Policies 1	That This Grant Program Support	rts: (check all that apply)			
<u>Priorities</u>	Policies		Other: (specify below)		
☐ Integrating Communities and S	_ , ,				
☐ Elevating Educational Leaders					
☐ Embracing the Information Age		e Learning Environments			
<ul> <li>☐ Ensuring Early Childhood Liter</li> <li>☑ Ensuring Excellent Educators</li> </ul>		ent			
	☐ Safe Schools				
4. Grant Categories (if not desc	cribed in Item 2): NOT APPL	ICABLE			
5. Target Population to be Serv	red by Grant:				
Teacher preparation institutions with an existing induction consortium of high needs schools in the thumb region. Intermediate School Districts serving high priority schools in Berrien County, and Wayne County.					
6. Total Funds Awarded:					
\$50,000					
7. Eligible Applicants:					
Teacher prep. institutions w/an existing induction consortium of high needs schools. Intermediate School Districts serving high priority schools in Berrien County, and Wayne County.					
8. Description of Priorities Give	en to Any Specific Population of	r Location: NOT APPLIC	CABLE		
9. Grant Administration:					
Office	Unit	Contact	Phone		
Office of Prof. Preparation Services	Professional Preparation and Development	Dr. Bonnie Rockafellow	37861		
Prepared by: Claudia Nicol		Phone Number: 5°	1151		
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10. OFFICE Office Director Approval Signature: Alors L. Jenk Phone: 3-6505 Comments:	Date 9/28/05
11. GRANTS OFFICE Grants Office Approval Signature: Mary a Charled Comments:	Date:10/5/05
Exhibit A Not Required Exhibit B Not Required	Exhibit C Not Required
Deputy Superintendent Approval Signature:  Comments:	Date: 10-12-05
13. SUPERINTENDENT Superintendent Approval Signature: Comments:	Date: 10-14-05

## **INSTRUCTIONS**

- A. Complete items 1-10 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 11-14.
- B. Attach three (3) sets of Exhibits A, B, and C.

Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.

Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.

Exhibit C---Map of Michigan indicating the location of recommended applicants. Link to: <a href="http://mdeintranet/inside/off/grants/grants.htm">http://mdeintranet/inside/off/grants/grants.htm</a> for sample maps.

- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grants Administration and Coordination Unit.

## Intensive Training of Mentors for High Needs School Districts <u>Applicants Recommended for Funding</u>

Agency		Award Amount	
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Saginaw Valley State University		\$50,000	